

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	7/53/6	9/30/00
O.I.P.E. CLASSIFIER		43	10/10/00
FORMALITY REVIEW	CT	64916	11/8/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	9/30/00
2	10/10/00
3	10/10/00
4	10/10/00
5	10/10/00
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8	10/10/00
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49	10/10/00
50	10/10/00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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